

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		71530	10/22
O.I.P.E. CLASSIFIER			10-26-99
FORMALITY REVIEW		CB390	11/03/99

RFR

LA
LH
CB390
CB390 B/120/00

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral)... Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	5/4/01
2	✓	✓	10/10/01
3	✓	✓	7/30/02
4	✓	✓	10/2/02
5	✓	✓	10/3/02
6	✓	✓	10/3/02
7	✓	✓	10/3/02
8	✓	✓	10/3/02
9	✓	✓	10/3/02
10	✓	✓	10/3/02
11	✓	✓	10/3/02
12	✓	✓	10/3/02
13	✓	✓	10/3/02
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15	✓	✓	10/3/02
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If more than 150 claims or 10 actions
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